MAR 3 1 2005

PTO/SB/83 (01-03) Approved for use through 11/30/2005. OMB 0651-0035

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

To: Commissioner for Patents Washington, DC 20231						
I hereby apply to withdraw as attorney or agent for the above identified patent application.						
The reasons for this re-	quest are: At the request of the client.					
1. The corresponder	. The correspondence address is NOT affected by this withdrawal.					
2. Change the corre	spondence address and direct all futu	re corres	pondence to:			
CORRESPONDENCE ADDRESS Customer Number				Place Customer Number Ber Code Label here		
OR						
Firm or Individual Name					ntusurg.com)	
Address	Intuitive Surgical, Inc.					
Address 950 Kifer Road				*		
City	Sunnyvale	State	CA ZIP 9408		94086	
Country	USA					
Telephone	(408)-523-2129	Fax	(408)-523-1390			
This request is made on behalf of myself and all the attorneys/agents of record. the attorneys/agents (with registration numbers) listed on the attached paper(s), or the attorneys/agents associated with Customer Number 20350 the attorneys/agents associated with Customer Number 20350						
This request is enclosed in triplicate (including any attachments).						
Name Mark D. Barrish, Reg. No. 36,443, Townsend and Townsend and Crew, LLP						
Signature Mad & S I						
Date 3/2	Date 3/29/05					
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.						

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 38 U.S. c1.22 and 37 CFR 1.4. This collection is estimated to late! 2 minutes to complete, including gathering, preparing, and aubmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce. Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

MADENARY

Application Number	10/795,963	
Filing Date	March 7, 2004	
First Named Inventor	Gere et al.	
Art Unit	3739	
Examiner Name	Unassigned	
Attorney Docket Number	017516-001520US	

To: Commissioner fo Washington, DC				*			
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The reasons for this re	The reasons for this request are: At the request of the client.						
			Ē				
1. The corresponde	. The correspondence address is NOT affected by this withdrawal.						
2. Change the corre	spondence address and direct all futu						
CORRESPONDENCE ADDRESS Customer Number			Place CL	Place Customer Number Bar Code Label here			
OR							
Firm or Individual Name Frank Nguyen, Vice President & General Counsel (E-mail: Frank.Nguyen@intusurg.com				uyen@intusurg.com)			
Address	Intuitive Surgical, Inc.						
Address	950 Kifer Road 4						
City	Sunnyvale	State	CA	ZIP 94086			
Country	USA						
Telephone	(408)-523-2129	Fax	(408)-523-1390				
This request is made on behalf of myself and all the attorneys/agents of record. the attorneys/agents (with registration numbers) listed on the attached paper(s), or the attorneys/agents associated with Customer Number 20350							
This request is enclosed in tri	plicate (including any attachments).						
Name Mark D. Bamish, Reg. No. 36,443, Townsend and Townsend and Crew, LLP							
Signature Mul D B I							
Date 3/2	Date 3/28/05						
	en approved rather than when received. Unless						

This collection of information is required by 3T CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USFTO to process) an application. Confidentiality is governed by 36 U.S. c.1 22 and 3T CFR 1.4. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application from to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this flow mandor suggestions for reducing this burder, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TOTHIS ADDRESS. SEND TO: Commissioner for pretents, Washington, DC 20231.

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ADEM	•
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To: Commissioner for Washington, DC						
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The reasons for this request are: At the request of the client.						
1. The corresponde	nce address is NOT affected by this w	ithdrawal				
2. A Change the corre	COPPESPONDENCE ADDRESS					
Customer Number	Place Customer Number Bar Code Label here					
OR						
Firm or Individual Name	Frank Nguyen, Vice President & General	Counsel	(E-mail: F	Frank.Ngu	ıyen@ir	ntusurg.com)
Address	Intuitive Surgical, Inc.					
Address	950 Kifer Road		B			
City	Sunnyvale	State	CA		ZIP	94086
Country	USA					
Telephone	(408)-523-2129	Fax	(408)-523-1390			
all the attorned the attorneys/s	le on behalf of myself and vs/agents of record. agents (with registration numbers) liste agents associated with Customer Num			s), or		
This request is enclosed in tri	plicate (including any attachments).					
Name Mark D. Barrish	, Reg. No. 36,443, Townsend and Townse	nd and Cr	ew, LLP			
Date 3/2	9/05					
NOTE: Withdrawal is effective wh	en approved rather than when received. Unless	there are a	t least 30 days betwe	een approv	al of with	ndrawal

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